

DONNAMARIE PANTALEO  
54 ARDMORE AVENUE  
RUNNEMEDE, NJ 08078

**OFFICE OF THE CHAPTER 13 STANDING TRUSTEE**

Isabel C. Balboa  
Chapter 13 Standing Trustee  
Cherry Tree Corporate Center  
535 Route 38, Suite 580  
Cherry Hill, NJ 08002-2977  
(856) 663-5002

**UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF NEW JERSEY  
(Camden)**

In Re:

DONNAMARIE V. PANTALEO

Debtor(s).

Proceedings in Chapter 13

Case No.: 20-18898-JNP

**TRUSTEE'S STATEMENT PURSUANT  
TO 11 U.S.C. §§ 1302(c), 1106(a)(3), and  
1106(a)(4)**

The Chapter 13 Standing Trustee hereby submits this Statement of Investigation of the financial affairs of the Debtor(s) pursuant to 11 U.S.C. §§ 1302(c), 1106(a)(3) and 1106(a)(4).

1. The Trustee's office has conducted a § 341(a) Meeting of Creditors and a business examination which consisted of the review of the Petition, Schedules A - J, Statement of Financial Affairs, and Statement of Current Monthly Income, including a comparison between the Debtor(s)' filed petition and schedules and Certification of Business Debtor (attached hereto as Exhibit "A").

2. The Trustee, except to the extent that the Court orders otherwise, has investigated the acts, conduct, assets, liabilities, and financial condition of the Debtor(s), the operation of the Debtor(s)' business and the desirability of the continuance of such business, and any other matter relevant to the case or to the formulation of a plan.

3. Furthermore, in connection with the investigation, the Trustee has not ascertained any fact pertaining to fraud, dishonesty, incompetence, misconduct, mismanagement or irregularity in the management of the affairs of Debtor(s), or to a cause of action available to the estate.

Dated: October 07, 2020

ICB: KES  
via first class mail:

DONNAMARIE V. PANTALEO

Respectfully submitted,

/s/ ISABEL C. BALBOA

ISABEL C. BALBOA

Chapter 13 Standing Trustee

UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF NEW JERSEY  
(Camden)

IN RE:

Proceedings in Chapter 13

Case Number: \_\_\_\_\_ (ABA / JNP)

CERTIFICATION OF DEBTOR  
FOR DISSOLUTION OF A BUSINESS  
WITHIN THE LAST TWO (2) YEARS

Debtor(s).

I, Donnamarie Pantaleo being duly sworn, upon my oath state:

1. I had an ownership interest in the business known as Samboney Enterprises LLC
2. I operated the business at 3614 Lakeside Dr Williamstown, NJ.
3. I operated this business as a (sole proprietorship, LLC, LLP, Partnership, Corp. or Franchise).
4. I started this business on mm/dd/yyyy. 01/22/2009
5. I ended this business on mm/dd/yyyy. 08/01/2019
6. I had an ownership interest of 100 %.
7. I (dissolved) or canceled or sold the business.
8. I (have) or have not complied with all Federal and State requirements regarding the closure of this business.
9. I had bank accounts in the following financial institutions which were utilized for my business operations (include Paypal & online accounts):

Bank Name	Type of Account / Purpose	Account Number (Last 4 digits)
<u>TA Bank</u>	<u>Checking/General</u>	<u>3356</u>
<u>TD Bank</u>	<u>Checking / Petty Cash</u>	<u><del>3353</del> 3353</u>
<u>Newfield National</u>	<u>Checking / General</u>	

10. I (have) or have not closed these accounts with the bank.
11. I (have) or have not filed **final** business tax returns with the Internal Revenue Service and State of New Jersey or any other state or commonwealth for all the prior tax years, for which I/the business were required to file a return.
12. At the time of closing, the value of my business assets, including tools, equipment, inventory, and accounts totaled \$ 0.00.
13. At the time of closing, I had business obligations which totaled \$ 0.00.

14. In support of this certification and as required by the Standing Trustee, I provide the following attached documents (attached):

- ☒ Verification of dissolution of the business from the Internal Revenue Service and/or State of New Jersey or any other state or commonwealth;
- ☐ Last two (2) filed Federal Tax Returns, with all supporting schedules and statements; and
- ☐ Bank statements for six (6) months ending the month prior to filing OR verification that all business accounts have been closed.

I declare under penalty of perjury that the foregoing statements are true and correct.

I have read and acknowledge my responsibilities as a business debtor.

I understand that by filing this certification with the Standing Trustee and attachments in its support, I am signing the document under Fed. R. Bankr. P. 9011.

I declare that (I or my attorney) will retain the original signature of this certification for a period of seven (7) years from the date of the closing of this case pursuant to Fed. R. Bankr. P. 8011.

Date: \_\_\_\_\_

/s/ Donna Marie Pastalis

Debtor

Date: \_\_\_\_\_

/s/ \_\_\_\_\_

Co-Debtor



UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF NEW JERSEY  
(Camden)

IN RE:

Proceedings in Chapter 13

Case Number: \_\_\_\_\_ (ABA / JNP)

CERTIFICATION OF DEBTOR  
DERIVING INCOME FROM  
NON-EMPLOYEE COMPENSATION  
(IRS FORM 1099-MISC INCOME)

Debtor(s).

I, Donnamarie Pantaleo

being duly sworn, upon my oath state: NJ

1. I derive income from non-employee compensation (IRS Form 1099-Misc) for the following company(ies):
  - a. Quatra Management Services
  - b. E Z 2 Dump LLC
2. The nature of my work as a Form 1099-Misc employee is consulting/compliance
3. I began as a Form 1099-Misc employee on 01/2019
4. I presently received income as a 1099 employee.  
b. NO received
5. I stopped as a Form 1099-Misc employee on N/A
6. I do not have separate liability insurance coverage for the work I perform as a Form 1099-Misc employee.
7. As of the date of this certification I have the following insurance coverage(s):

<input type="checkbox"/> Auto insurance;	<input type="checkbox"/> Professional liability insurance (E&O);
<input type="checkbox"/> Property insurance;	<input type="checkbox"/> Malpractice insurance;
<input type="checkbox"/> Other: _____;	<input checked="" type="checkbox"/> No insurance required.
8. I do not have an active license or permit for the work I perform as a Form 1099-Misc employee.
9. I have bank accounts in the following financial institutions which are utilized for the work I perform as a Form 1099-Misc employee. (include Paypal & online accounts):

Bank Name	Type of Account / Purpose	Account Number (Last 4 digits)
<u>TD Bank</u>	<u>Checking/Joint</u>	<u>2767</u>

10. I do have business expenses associated with the work I perform as a Form 1099-Misc employee (i.e. gas, travel, tolls, etc.).
11. These expenses are ( unreimbursed ) by my employer.
12. I have filed individual tax returns with the Internal Revenue Service for all the prior tax years, for which I/the business was required to file a return.
13. I have filed applicable state tax returns with the State of New Jersey or any other state or commonwealth for all prior tax years, for which I/the business was required to file a return.
14. As of the date of this certification, the value of my business assets, including tools, equipment, inventory, and accounts total \$ 0.00.
15. As of the date of this certification, I have business obligations which total \$ 0.00.
16. In support of this certification and as required by the Standing Trustee, I provide the following attached documents (attached):

- ☒ Last two (2) filed Federal Tax Returns, with all supporting schedules and statements;
- ☒ Last Form 1099-Misc received;
- ☒ Bank statements for six (6) months ending the month prior to filing;
- ☐ Current insurance declaration page;
- ☐ Current license and/or permit, plus municipal and county licenses and certifications; and
- ☐ Profit and loss statements for Form 1099-Misc expenses for six (6) months ending the month prior to filing.

I declare under penalty of perjury that the foregoing statements are true and correct.

I have read and acknowledge my responsibilities as a business debtor.

I understand that by filing this certification with the Standing Trustee and attachments in its support, I am signing the document under Fed. R. Bankr. P. 9011.

I declare that I, the debtor will retain the original signature of this certification for a period of seven (7) years from the date of the closing of this case pursuant to Fed. R. Bankr. P. 8011.

Date: \_\_\_\_\_

/s/ Donnamarie Pastaleo

Debtor

Date: \_\_\_\_\_

/s/

Co-Debtor

## OFFICE OF THE CHAPTER 13 STANDING TRUSTEE

Isabel C. Balboa, Chapter 13 Standing Trustee

### Certification of Business Debtor for Landlord

Debtor(s) Name: Donnamarie Pontaleo  
Case Number: \_\_\_\_\_  
E-Mail: donna.pontaleo@yahoo.com

I, as the Debtor(s) named above, being of full age & duly sworn upon my oath, depose and say:

OWNERSHIP IN RENTAL PROPERTIES							
	Address of Property	Name(s) on Deed	% of Debtor's Ownership in Property	Relationship to Joint Owner, if any	Monthly Mortgage Payment (w/ Tax & Ins)	Mortgage Payoff	Current Fair Market Value
#1	54 Ardmore Ave Rummede, NJ	Mark & Donnamarie Pontaleo	50%	Spouse	\$1145.88	199411.86	
#2							
#3							
#4							
#5							

	Is Property currently being rented?	Tenant's Name	Is there a written Lease Agreement?	Lease Dates (Month/Year-Month/Year)	Rental Amount	Is there current insurance on property?
#1	Unit B	Amanda Barrett	Yes	04/01/2020 03/31/2021	950. <sup>00</sup>	Yes
#2						
#3						
#4						
#5						

**Production of Documents**

- ☒ PROVIDE COPIES OF THE LAST TWO (2) FILED TAX RETURNS, ALONG WITH ALL SUPPORTING SCHEDULES AND STATEMENTS. NOTE: Please redact SS#s (XXX-XX-1234), dependent(s)' names and birth dates.
- ☒ PROVIDE A COPY OF THE CURRENT INSURANCE POLICY DECLARATION PAGE. NOTE: If proof of effective insurance is not provided to the Trustee with ten (10) days prior to the first scheduled 341(a) Meeting of Creditors, the Trustee may move to dismiss this case.
- ☒ PROVIDE COPIES OF ALL BANK STATEMENTS FOR ONE (1) MONTH PRIOR TO FILING FOR EACH TENANT FOR WHICH YOU HOLD A SECURITY DEPOSIT OR SHOW PROOF OF THE SAFEKEEPING OF SUCH DEPOSIT. *Savings*
- ☒ PROVIDE A COPY OF THE CURRENT RENTAL AGREEMENT WITH ALL PAGES AND SIGNATURES. If there is no rental agreement, provide proof of rent received (i.e. canceled checks, letter from renter(s), and/or copies of bank statements for three (3) months prior to filing).
- ☒ PROVIDE A COPY OF THE CURRENT MORTGAGE PAYOFF STATEMENT SHOWING CURRENT BALANCE DUE AND MONTHLY PAYMENT AMOUNT.
- ☒ PROVIDE A COMPARATIVE MARKET ANALYSIS (CMA) INDICATING THE CURRENT VALUE OF THE PROPERTY. NOTE: A Zillow estimate is not acceptable.

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I declare, as the Debtor(s) named above, under penalty of perjury that the foregoing information is true and correct.

- ☐ I have attached all the required documents requested.
- ☐ I read and acknowledge Responsibilities as a Business Debtor ([www.standingtrustee.com/forms](http://www.standingtrustee.com/forms)).
- ☐ I understand that filing this document under the Trustee's Filing System (T.F.S.) constitutes the Participant's signature for purposes of signing the document under Fed. R. Bankr. P. 9011.

/s/ Print Debtor's Name:

Donnamarie Pantaleo

/s/ Print Co-Debtor's Name:

Dated (mm/dd/yyyy):

6/27/2020